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2
3 BEFORE THE ARIZONA MEDICAL BOARD
4

5 In the Matter of

6 **PARMIS RAD, M.D.**

7 Holder of License No. 42399
8 For the Practice of Allopathic Medicine
In the State of Arizona.

Case No. MD-11-0913A

**ORDER FOR LETTER OF REPRIMAND
AND PROBATION AND CONSENT TO
THE SAME**

9 Parmis Rad, M.D. ("Respondent") elects to permanently waive any right to a
10 hearing and appeal with respect to this Order for Letter of Reprimand and Probation;
11 admits the jurisdiction of the Arizona Medical Board ("Board"); and consents to the entry of
12 this Order by the Board.

13 **FINDINGS OF FACT**

14
15 1. The Board initiated case number MD-11-0913A after receiving information
16 from a pharmacist alleging that Respondent prescribed controlled substances to her
17 husband, and was using prescription pads that did not contain her current contact
18 information.

19 2. Copies of prescriptions dated February 14, April 28, and June 17 of 2011
20 were written on prescription pads that contained the address of her previous employer.
21 The Board's database shows that Respondent had not worked there since before June of
22 2010. The pharmacist determined that the prescriptions were written for RL, who showed
23 the same address as Respondent. It was later determined that Respondent wrote a
24 prescription to her husband.

25 3. A Medical Consultant (MC) observed that a query of RL to the Controlled

1 Substance Prescription Monitoring Program showed that Respondent had prescribed
2 Roxicet, Zolpidem, and Oxycodone/Acetaminophen for RL. Respondent denied using any
3 of RL's medication to treat her own pain. She stated that she was very careful to monitor
4 him and make sure the medications were used correctly. Respondent told Board staff
5 that she did not keep records of her scheduled medication prescribing for RL.
6 Respondent stated that she did maintain progress notes regarding RL's exams and that
7 she kept his record in her home.

8 4. The MC determined that Respondent failed to document progress notes on
9 RL identifying the patient and the date of the evaluations, and that she failed to document
10 the scheduled medication prescriptions that were provided to RL. The MC also found that
11 Respondent engaged in unprofessional conduct by prescribing controlled substances to a
12 member of her immediate family.

13 5. On September 9, 2011, Banner Good Samaritan (BGS) reported that
14 Respondent may be impaired and unable to engage safely in the practice of medicine
15 and she was placed on a leave of absence. BGS reported that Respondent had
16 accessed her electronic medical record (EMR) and printed prescriptions for Clonazepam
17 and Ambien on multiple occasions. Respondent told Board staff that she pulled up her
18 own chart to learn to navigate the new EMR system and unintentionally printed her
19 records, including prescriptions written to her.

20 6. On October 4, 2011, Respondent reported that she voluntarily sought 5-day
21 inpatient psychiatric care. The Board's Physician Health Program (PHP) contractors
22 recommended that she submit to an evaluation at a Board approved facility immediately.
23 Respondent presented to Promises Treatment Centers on October 9, 2011 and
24 completed the evaluation on October 12, 2011. Promises recommended that Respondent
25 complete 30-90 days residential inpatient treatment.

7. Respondent presented for residential treatment at Sante Center for Healing on November 21, 2011. It was determined that she needed a minimum of 90 days treatment. After failing the polygraph test, Respondent left treatment on February 24, 2012, prior to staff approval and against medical advice. The PHP contractor reported that he was unable to determine Respondent's ability to safely practice medicine. He recommended that she successfully complete residential treatment for a period of time determined by the treatment facility and that she be reassessed upon completion of treatment. Respondent entered into an Interim Consent Agreement for Practice Restriction on October 20, 2011.

8. BGS's report of a prescription printed from Respondent's EMR that had the quantity, dose, and refills taped over. Additionally, Respondent accessed her EMR and printed a prescription for herself for Clonazepam, a controlled substance. Respondent's attorney subsequently responded to the Board's findings reporting that Respondent successfully completed residential inpatient treatment at Promises Treatment Centers on May 31, 2012. On June 25, 2012, after having been reassessed by the Board's PHP contractor and found to be safe to practice medicine, Respondent entered into an Interim Consent Agreement for PHP participation. The Interim Practice Restriction was vacated in July 2012.

CONCLUSIONS OF LAW

1. The Board possesses jurisdiction over the subject matter hereof and over Respondent.

1 2. The conduct and circumstances described above constitute unprofessional
2 conduct pursuant to A.R.S. § 32-1401(27)(a) ("[v]iolating any federal or state laws or rules
3 and regulations applicable to the practice of medicine", namely,

4 A.R.S. §32-1491 (A) A doctor of medicine may dispense drugs
5 and devices kept by the doctor if:

6 1. All drugs are dispensed in packages labeled with the
7 following information:

8 (a) The dispensing doctor's name, address and telephone
9 number.

10 3. The conduct and circumstances described above constitute unprofessional
11 conduct pursuant to A.R.S. §32-1401(27)(e) ([f]ailing or refusing to maintain adequate
12 records on a patient. ")

13 4. The conduct and circumstances described above constitute unprofessional
14 conduct pursuant to A.R.S. § 32-1401(27)(f) ("[h]abitual intemperance in the use of alcohol
15 or habitual substance abuse.")

16 5. The conduct and circumstances described above constitute unprofessional
17 conduct pursuant to A.R.S. § 32-1401(27)(g) ("[u]sing controlled substances except if
18 prescribed by another physician for use during a prescribed course of treatment.")

19 6. The conduct and circumstances described above constitute unprofessional
20 conduct pursuant to A.R.S. § 32-1401(27)(h) ("[p]rescribing or dispensing controlled
21 substances to members of the physician's immediate family.")

22 7. The conduct and circumstances described above constitute unprofessional
23 conduct pursuant to A.R.S. § 32-1401(27)(t) ("[k]nowingly making any false or fraudulent
24 statement, written or oral, in connection with the practice of medicine or if applying for
25 privileges or renewing an application for privileges at a health care institution.")

ORDER

IT IS HEREBY ORDERED THAT:

A. Respondent is issued a Letter of Reprimand.

B. Respondent is placed on Probation for five years with the following terms and conditions:

1. **Participation**¹. Respondent shall promptly enroll in and participate in the Board's Physician Health Program (PHP) monitoring service which is administered by a private contractor. ("Monitor").

2. **Relapse Prevention Group**. Respondent shall attend the Monitor's relapse prevention group therapy sessions one time per week for the duration of this Order, unless excused by the relapse prevention group facilitator for good cause. Individual relapse therapy may be substituted for one or more of the group therapy sessions, if Monitor pre-approves substitution. The relapse prevention group facilitators or individual relapse prevention therapist shall submit monthly reports to the Monitor regarding attendance and progress.

3. **12 Step or Self-Help Group Meetings**. If applicable, Respondent shall attend ninety 12-step meetings or other self-help group meetings appropriate for substance abuse and approved by the Monitor, for a period of ninety days. Upon completion of the ninety meetings in ninety days, Respondent shall participate in a 12-step recovery program or other self-help program appropriate for substance abuse as recommended by the Monitor. Respondent shall attend a minimum of three 12-step or other self-help program meetings per week.. Two meetings per month must be Caduceus

¹ Respondent's PHP participation is retroactive to June 25, 2012

1 meetings. Respondent must maintain a log of all self-help meetings.

2 4. **Approved Primary Care Physician.** Respondent shall promptly obtain a
3 primary care physician and shall submit the name of the physician to the Monitor in writing
4 for approval. The approved primary care physician ("PCP") shall be in charge of providing
5 and coordinating Respondent's medical care and treatment. Except in an *Emergency*,
6 Respondent shall obtain medical care and treatment only from the PCP and from health
7 care providers to whom the PCP refers Respondent. Respondent shall promptly provide
8 a copy of this Order to the PCP. Respondent shall also inform all other health care
9 providers who provide medical care or treatment that Respondent is participating in PHP.
10 "*Emergency*" means a serious accident or sudden illness that, if not treated immediately,
11 may result in a long-term medical problem or loss of life.

12 5. **Medication.** Except in an *Emergency*, Respondent shall take no *Medication*
13 unless the PCP or other health care provider to whom the PCP refers Respondent
14 prescribes the *Medication*. Respondent shall not self-prescribe any *Medication*.
15 "*Medication*" means a prescription-only drug, controlled substance, and over-the counter
16 preparation, other than plain aspirin, plain ibuprofen, and plain acetaminophen. If a
17 controlled substance is prescribed, dispensed, or administered to Respondent by any
18 person other than PCP, Respondent shall notify the PCP in writing within 48 hours and
19 notify the Monitor immediately.

20 6. **No Alcohol or Poppy Seeds.** Respondent shall not consume alcohol, any
21 food, or other substance containing poppy seeds or alcohol.

22 7. **Biological Fluid Collection.** Respondent shall provide the Monitor in
23 writing with one telephone number that shall be used to contact Respondent on a 24 hour
24 per day/seven day per week basis to submit to biological fluid collection. For the purposes
25 of this section, telephonic notice shall be deemed given at the time a message to appear is

1 left at the contact telephone number provided by Respondent. Respondent authorizes any
2 person or organization conducting tests on the collected samples to provide testing results
3 to the Monitor. Respondent shall comply with all requirements for biological fluid
4 collection.

5 8. **Out of State Travel and/or Unavailability at Home/Office Telephone**
6 **Number.** Respondent shall provide the Monitor with written notice of any plans to travel
7 out of state.

8 9. **Payment for Services.** Respondent shall pay for all costs, including Monitor
9 costs associated with participating in PHP at the time service is rendered, or within 30
10 days of each invoice sent to the Respondent. An initial deposit of two months monitoring
11 fees is due upon entering the program. Failure to pay either the initial monitoring deposit
12 or monthly fees 60 days after invoicing will be reported to the Board by the contractor and
13 may result in disciplinary action up to and including revocation.

14 10. **Interviews.** Respondent shall appear in person before the Monitor for
15 interviews upon request, upon reasonable notice.

16 11. **Address and Phone Changes, Notice.** Respondent shall immediately notify
17 the Monitor in writing of any change in office or home addresses and telephone numbers.

18 12. **Relapse, Violation.** In the event of chemical dependency relapse by
19 Physician or Physician's use of drugs or alcohol in violation of the Order, Physician
20 shall promptly enter into an Interim Order for Practice Restriction and Consent to
21 the Same that requires, among other things, that Physician not practice medicine
22 until such time as Physician successfully completes long-term inpatient treatment
23 for chemical dependency designated by the Monitor and obtains affirmative
24 approval from the Board or the Executive Director to return to the practice of
25 medicine. Prior to approving Physician's request to return to the practice of

1 medicine, Physician may be required to submit to witnessed biological fluid
2 collection or undergo any combination of physical examination, psychiatric or
3 psychological evaluation. **In no respect shall the terms of this paragraph restrict**
4 **the Board's authority to initiate and take disciplinary action for violation of**
5 **this Order.**

6 13. **Notice Requirements.** Respondent shall immediately provide a copy of this
7 Order to all current and future employers and all hospitals and free standing surgery
8 centers where Respondent has privileges. Within 30 days of the date of this Order,
9 Respondent shall provide the Monitor with a signed statement of compliance with this
10 notification requirement. Respondent is further required to notify, in writing, all employers,
11 hospitals and free standing surgery centers where Respondent currently has or in the
12 future gains employment or privileges, of a chemical dependency relapse.,

13 14. **Out-of-State.** In the event Respondent resides or practices as a physician
14 in a state other than Arizona, Respondent shall participate in the rehabilitation program
15 sponsored by that state's medical licensing authority or medical society. Respondent shall
16 cause the monitoring state's program to provide written quarterly reports to the Monitor
17 regarding Respondent's attendance, participation, and monitoring. The monitoring state's
18 program and Respondent shall immediately notify the Monitor if Respondent: a) is non-
19 compliant with any aspect of the monitoring requirements; b) relapses; c) tests positive for
20 controlled substances; d) has low specific gravity urine drug test(s), missed and/or late
21 urine drug tests, or otherwise rejected urine drug tests; and e) is required to undergo any
22 additional treatment.

23 15. Respondent shall immediately obtain a treating psychotherapist approved by
24 the Monitor and shall remain in treatment with the psychotherapist for six months.
25 Respondent shall instruct the psychotherapist to release to the Monitor, upon request, all

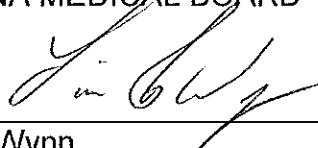
1 records relating to Respondent's treatment, and to submit a written report to the Monitor at
2 the end of treatment regarding diagnosis, prognosis, medications, and recommendations
3 for continuing care and treatment of Respondent. Respondent shall provide the
4 psychotherapist with a copy of this order. Respondent shall pay the expenses of all the
5 psychiatric care and for the preparation of the quarterly reports.

6 16. This Order supersedes all previous consent agreements and stipulations
7 between the Board and/or the Executive Director and Respondent.

8 17. The Board retains jurisdiction and may initiate new action based upon any
9 violation of this Order.

10 DATED AND EFFECTIVE this 4th day of October, 2012.

11 ARIZONA MEDICAL BOARD

12
13 By 
14 Lisa S. Wynn
15 Executive Director

16 **CONSENT TO ENTRY OF ORDER**

17 1. Respondent has read and understands this Consent Agreement and the
18 stipulated Findings of Fact, Conclusions of Law and Order ("Order"). Respondent
19 acknowledges she has the right to consult with legal counsel regarding this matter.

20 2. Respondent acknowledges and agrees that this Order is entered into freely
21 and voluntarily and that no promise was made or coercion used to induce such entry.

22 3. By consenting to this Order, Respondent voluntarily relinquishes any rights to
23 a hearing or judicial review in state or federal court on the matters alleged, or to challenge
24 this Order in its entirety as issued by the Board, and waives any other cause of action
25 related thereto or arising from said Order.

1 4. The Order is not effective until approved by the Board and signed by its
2 Executive Director.

3 5. All admissions made by Respondent are solely for final disposition of this
4 matter and any subsequent related administrative proceedings or civil litigation involving
5 the Board and Respondent. Therefore, said admissions by Respondent are not intended
6 or made for any other use, such as in the context of another state or federal government
7 regulatory agency proceeding, civil or criminal court proceeding, in the State of Arizona or
8 any other state or federal court.

9 6. Upon signing this agreement, and returning this document (or a copy thereof)
10 to the Board's Executive Director, Respondent may not revoke the consent to the entry of
11 the Order. Respondent may not make any modifications to the document. Any
12 modifications to this original document are ineffective and void unless mutually approved
13 by the parties.

14 7. This Order is a public record that will be publicly disseminated as a formal
15 disciplinary action of the Board and will be reported to the National Practitioner's Data
16 Bank and on the Board's web site as a disciplinary action.

17 8. If any part of the Order is later declared void or otherwise unenforceable, the
18 remainder of the Order in its entirety shall remain in force and effect.

19 9. If the Board does not adopt this Order, Respondent will not assert as a
20 defense that the Board's consideration of the Order constitutes bias, prejudice,
21 prejudgment or other similar defense.

22 10. Any violation of this Order constitutes unprofessional conduct and may result
23 in disciplinary action. A.R.S. § § 32-1401(27)(r) ("[v]iolating a formal order, probation,
24 consent agreement or stipulation issued or entered into by the board or its executive
25 director under this chapter") and 32-1451.

1 **11. Respondent has read and understands the conditions of probation.**

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5 Parmis Rad, M.D.

DATED: 8.15.12

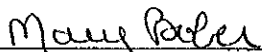
6 EXECUTED COPY of the foregoing mailed
7 this 4th day of October, 2012 to:

8 Bryan F. Murphy
9 Ms. Clarissa Reiman
10 Burch & Cracchiolo
11 702 East Osborn Road, Ste 200
12 Phoenix, AZ 85014
13 (Attorneys for Respondent)

14 ORIGINAL of the foregoing filed
15 this 4th day of October, 2012 with:

16 Arizona Medical Board
17 9545 E. Doubletree Ranch Road
18 Scottsdale, AZ 85258

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27 Arizona Medical Board Staff